

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ROTHFUS FOR CONGRESS

ADDRESS (number and street)

PO BOX 435

Check if different  
than previously  
reported. (ACC)

SEWICKLEY

PA

15143

2. FEC IDENTIFICATION NUMBER ▼

C

C00497115

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

PA

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y  
04 / 26 / 2016in the  
State of

PA

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2016

through

M M / D D / Y Y Y Y  
04 / 06 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer WILLIAM HASKINS

Signature of Treasurer

WILLIAM HASKINS

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 14 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 121

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

ROTHFUS FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	158445.12	985262.71
(b) Total Contribution Refunds (from Line 20(d)) .....	3700.00	9500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	154745.12	975762.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	127536.31	426819.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2374.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	127536.31	424445.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1118040.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1344.83	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 121

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

ROTHFUS FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	6

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

87847.48

688616.09

(ii) Unitemized.....

9847.64

28196.62

(iii) TOTAL of contributions from individuals ▶

97695.12

716812.71

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

60750.00

268450.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

158445.12

985262.71

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

34282.79

49989.18

## 13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

## 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0.00

2374.07

## 15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0.00

0.00

## 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

192727.91

1037625.96

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 121

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	127536.31	426819.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	3700.00	6500.00
(b) Political Party Committees.....	0.00	3000.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3700.00	9500.00
21. OTHER DISBURSEMENTS .....	3130.00	37180.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	134366.31	473499.77

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1059679.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	192727.91
25. SUBTOTAL (add Line 23 and Line 24).....	1252407.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	134366.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1118040.86

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. WILLIAM E. ADAMS**

A.

Mailing Address P.O. BOX 1

City

PORTERSVILLE

State

PA

Zip Code

16051

FEC ID number of contributing federal political committee.

C

Name of Employer

ADAMS MANUFACTURING

Occupation

MANUFACTURER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31403

Amount of Each Receipt this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. WILLIAM E. ADAMS**

B.

Mailing Address P.O. BOX 1

City

PORTERSVILLE

State

PA

Zip Code

16051

FEC ID number of contributing federal political committee.

C

Name of Employer

ADAMS MANUFACTURING

Occupation

MANUFACTURER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31404

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SEAN K ANDREAS**

C.

Mailing Address 4224 WOODWIND LANE

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31442

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. FREDERICK ANTON, III</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2016	
Mailing Address 7 NORTH COLUMBUS BLVD. PIER 5 #137		<b>Transaction ID : SA11AI.31483</b>	
City PHILADELPHIA	State PA	Zip Code 19106	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PENNSYLVANIA MANUFACTURERS	Occupation EXECUTIVE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JOHN S. ARNOLD</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2016	
Mailing Address 1628 BLACKBURN HEIGHTS DRIVE		<b>Transaction ID : SA11AI.31296</b>	
City SEWICKLEY	State PA	Zip Code 15143	Amount of Each Receipt this Period _____ 50.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SHAMROCK	Occupation SALES		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. VINCENT J. BARBERA</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2016	
Mailing Address PO BOX 775		<b>Transaction ID : SA11AI.31484</b>	
City SOMERSET	State PA	Zip Code 15501	Amount of Each Receipt this Period _____ 1000.00 <input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer BARBERA, CLAPPER, BEENER, RULLO & ME	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2050.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD BECK**

Mailing Address 629 FOX FIELDS RD

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KLEHR HARRISON HARVEY BRANZBURG, LL

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31557

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. ROSLYN BERGER**

Mailing Address 203 GRANDVIEW DR. SOUTH

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31438

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. ALLISON B. BERGER-GARCIA**

Mailing Address 172 WOODSHIRE RD.

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HEMOCOURT

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31444

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 121  
 (check only one)  
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>DR. C. ROSS BETTS</b>			Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2016	
Mailing Address 10982 BABCOCK BOULEVARD			Transaction ID : SA11AI.31590	
City GIBSONIA	State PA	Zip Code 15044	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer NORTHERN TIER NEPHROLOGY		Occupation PHYSICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>MR. JOHN F. BITZER III</b>			Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2016	
Mailing Address 210 CHATHAM LANE			Transaction ID : SA11AI.31367	
City PITTSBURGH	State PA	Zip Code 15238	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer ABARTA INC.		Occupation EXECUTIVE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>MRS. GEORGIE BLACKBURN</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2016	
Mailing Address 1100 CONSTITUTION DR.			Transaction ID : SA11AI.31541	
City TARENTUM	State PA	Zip Code 15084	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer BLACKBURN'S PHYSICIANS PHARMACY		Occupation VP GOVERNMENT RELATIONS		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4700.00		

SUBTOTAL of Receipts This Page (optional).....			4000.00	
TOTAL This Period (last page this line number only).....				



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. EDWARD M. BOCZAR**

Mailing Address 600 MAIN STREET

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMGARD

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31443

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. MICHAEL BOLLINGER**

Mailing Address 4 FARMHILL ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMITH BROTHERS AGENCY

Occupation

ADVERTISING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2016

Transaction ID : SA11AI.31346

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. MARY P BORKOW**

Mailing Address 1618 SUNSHINE AVE

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31420

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1050.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MS. CONSTANCE BOSCHETTO**

A.

Mailing Address 213 HAZEL LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOUSEWIFE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

401.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 29 / 2016

Transaction ID : SA11AI.31310

Amount of Each Receipt this Period

50.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. CONSTANCE BOSCHETTO**

B.

Mailing Address 213 HAZEL LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOUSEWIFE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

451.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : SA11AI.31539

Amount of Each Receipt this Period

50.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. CONSTANCE BOSCHETTO**

C.

Mailing Address 213 HAZEL LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOUSEWIFE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

476.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31382

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

125.32

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. MARK BOZZONE

Mailing Address 353 MILL DAM ROAD

City

CHESKWICK

State

PA

Zip Code

15024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2016

Transaction ID : SA11AI.31542

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MR. MARK BOZZONE

Mailing Address 353 MILL DAM ROAD

City

CHESKWICK

State

PA

Zip Code

15024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2016

Transaction ID : SA11AI.31543

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MS. KAREN JOYCE BRUCE

Mailing Address 510 SHENANGO STOP RD

City

NEW CASTLE

State

PA

Zip Code

16101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31485

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. PATRICK CARTY**

Mailing Address 480 NORTH RIDGE STREET

City

RYE BROOK

State

NY

Zip Code

10573

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZURICH INSURANCE

Occupation  
GENERAL COUNSEL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 21 / 2016

Transaction ID : SA11AI.31562

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. SCOTT CESSAR**

Mailing Address 502 SALEM HEIGHTS DRIVE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ECKERT SEAMANS CHERIN & MELLOTT

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 01 / 2016

Transaction ID : SA11AI.31759

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. MIKE CIBIK**

Mailing Address 11 UMBER RD.

City

LEVITTOWN

State

PA

Zip Code

19056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CIBIK & CATALDO

Occupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11AI.31646

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. EDWIN V. CLARKE JR.**

Mailing Address 629 ACADEMY AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11AI.31666

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. KATHRYN D CLARKE**

Mailing Address 629 ACADEMY AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11AI.31669

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ROBERT F. CRAIG**

Mailing Address 8289 BRITTANY PLACE

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31384

Amount of Each Receipt this Period

40.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2940.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 121

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT CRNKOVICH**

Mailing Address 5907 MOSS WOOD LANE

City	State	Zip Code
MCLEAN	VA	22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11AI.31584

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. RON F. CROUSHORE**

Mailing Address 9401 MCKNIGHT RD.

City	State	Zip Code
PITTSBURGH	PA	15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BERKSHIRE HATHAWAY HOMESERVICESOccupation  
CEO OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11AI.31817

Amount of Each Receipt this Period

500.00

☐ Memo ItemEARMARKED CONTRIBUTION THROUGH C00484535  
VOTESANE PAC

**C.** Full Name (Last, First, Middle Initial)  
**VOTESANE PAC**

Mailing Address PO BOX 2713

City	State	Zip Code
ALEXANDRIA	VA	22301

FEC ID number of contributing  
federal political committee.

C C00484535

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2016

Transaction ID : SA11AI.31818

Amount of Each Receipt this Period

500.00

☒ Memo ItemEARMARKED(NON-DIRECTED): CONDUIT LIMIT  
NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 121

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. RICHARD K. DANDREA**

Mailing Address 3149 SCENIC COURT

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ECKERT SEAMANSOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31491

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. RICHARD K. DANDREA**

Mailing Address 3149 SCENIC COURT

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ECKERT SEAMANSOccupation  
ATTORNEY

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31492

Amount of Each Receipt this Period

2600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. SHARON S. DANDREA**

Mailing Address 3149 SCENIC COURT

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31493

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

5400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. LEON DEJULIUS**

Mailing Address 206 LONGBOW LN.

City

MARS

State

PA

Zip Code

16046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JONES DAY

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31448

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JOSEPH DOMAGALA**

Mailing Address 130 BROOKMEADE DRIVE

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PINE-RICHLAND SCHOOL DISTRICT

Occupation

ASSISTANT PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

201.60

Date of Receipt

M M / D D / Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11AI.31773

Amount of Each Receipt this Period

20.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RHONDORA J DONAHUE**

Mailing Address C/O THE BEECHWOOD CO, SUITE 850 10

City

PITTSBURG

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31505

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5220.16



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ECONOMY WELDING & INDUSTRIAL**

A.

Mailing Address 2120 BIG SEWICKLEY CREEK RD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31400

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. DONALD ROSENTHAL**

B.

Mailing Address 324 BAILEY AVENUE

City

PITTSBURGH

State

PA

Zip Code

15211

FEC ID number of contributing federal political committee.

C

Name of Employer

ECONOMY WELDING

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11AI.31814

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. LINDA K. FETTEROLF**

C.

Mailing Address 627 NEW CENTERVILLE RD.

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31479

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. JACK A FRYDRYCH**

Mailing Address 5345 OAK PARK AVE.

City

ENCINO

State

CA

Zip Code

91316

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11AI.31496

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. ANNETTE GANASSI**

Mailing Address 357 PHEASANT RUN DRIVE

City

CHAMPION

State

PA

Zip Code

15622

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31481

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. COLIN A. HANNA**

Mailing Address 603 FAIRWAY DRIVE

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

LET FREEDOM RING

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2016

Transaction ID : SA11AI.31572

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4200.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NANCY H HANSEN**

A.

Mailing Address 138 JAFFREY RD

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SA11AI.31654

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. WILLIAM SCOTT HARDY**

B.

Mailing Address 200 FIELD BROOK CT

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer

OGLETREE DEAKINS

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SA11AI.31663

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. WILLIAM K. HASKINS**

C.

Mailing Address 3908 ASHLAND COURT

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing federal political committee.

C

Name of Employer

GRANT STREET GROUP

Occupation

CFO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.31439

Amount of Each Receipt this Period

500.00

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT M HERNANDEZ

Mailing Address 176 GROUSE POINT

City

CHAMPION

State

PA

Zip Code

15622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31486

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MRS. EILEEN E HOLSTE

Mailing Address 626 GRANDVIEW AVE.

City

PITTSBURGH

State

PA

Zip Code

15211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

233.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SA11AI.31644

Amount of Each Receipt this Period

108.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VICKI HOLTHAUS

Mailing Address 920 SETTLER RIDGE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

EXECUTIVE COACH

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2016

Transaction ID : SA11AI.31298

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1258.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HUNTON & WILLIAMS**

A.

Mailing Address 951 EAST BYRD ST

City

RICHMOND

State

VA

Zip Code

23219

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31468

Amount of Each Receipt this Period

1000.00

☐ Memo Item

NO ITEMIZATION NECESSARY

Full Name (Last, First, Middle Initial)

**MR. JOHN W JACOB**

B.

Mailing Address 952 SHADY LANE

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

HIGHLAND TANK

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11AI.31362

Amount of Each Receipt this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JOHN W JACOB**

C.

Mailing Address 952 SHADY LANE

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

HIGHLAND TANK

EXECUTIVE

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11AI.31363

Amount of Each Receipt this Period

1300.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SCOTT M JENKINS**

A.

Mailing Address 24 MEADOWOOD RD

City

ROSEMONT

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11AI.31649

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. THEODORE KERR**

B.

Mailing Address 7432 FRANKLIN ROAD

City

CRANBERRY TWP.

State

PA

Zip Code

16066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOUCHSTONE CAPITAL INC.

Occupation

FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 03 / 2016

Transaction ID : SA11AI.31764

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. PAMELA J KROH**

C.

Mailing Address 809 WELDON ST

City

LATROBE

State

PA

Zip Code

15650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31489

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ZACHARY KROH**

Mailing Address 301 5TH AVENUE

APT. 704

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31482

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ELMER C. LASLO**

Mailing Address 501 CORRIGAN DR

City

JOHNSTOWN

State

PA

Zip Code

15904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

1ST SUMMIT BANK

Occupation

BANKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31529

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ROBERT A. MACKEY**

Mailing Address PO BOX 279

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31527

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1400.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

MS. RENEE J MATHUR

A.

Mailing Address 912 SUNNEHANNA DR.

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31476

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SARA G. MCCARGO

B.

Mailing Address 22 AUDUBON RD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31405

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SARA G. MCCARGO

C.

Mailing Address 22 AUDUBON RD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31406

Amount of Each Receipt this Period

2700.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5650.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. SCOTT MCCLINTOCK**

Mailing Address 247 FAWN HAVEN

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31503

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. MARK W. MCCLYMONDS**

Mailing Address P.O. BOX 296

City

PORTERSVILLE

State

PA

Zip Code

16051

FEC ID number of contributing federal political committee.

C

Name of Employer

MCCLYMONDS SUPPLY &amp; TRANSIT

Occupation

PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2016

Transaction ID : SA11AI.31347

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. CHAD A. MCCUTCHEON**

Mailing Address 612 FIELDSTONE DRIVE

City

APOLLO

State

PA

Zip Code

15613

FEC ID number of contributing federal political committee.

C

Name of Employer

MCCUTCHEON ENTERPRISES, INC.

Occupation

COMMUNICATIONS PROFESSIONAL

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31440

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. DOUGLAS R. MCILWAIN**

Mailing Address 1551 FERNDAL AVENUE

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing federal political committee.

C

Name of Employer

MCILWAIN CHARTER, INC.

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31478

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. THOMAS MCKNIGHT**

Mailing Address 1554 ALAQUA DR

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

MODERNE GLASS COMPANY INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1025.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11AI.31552

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. CHRIS S. MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

MCMAHON FINANCIAL LLC

Occupation

PARTNER

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 28 / 2015

Transaction ID : SA11AI.31042

Amount of Each Receipt this Period

2000.00

☒ Memo Item

REATTRIBUTION REQUESTED

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. CHRIS S. MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

MCMAHON FINANCIAL LLC

Occupation

PARTNER

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : SA11AI.31324

Amount of Each Receipt this Period

-2000.00

☒ Memo Item

REATTRIBUTED TO MCMAHON, MARY

Full Name (Last, First, Middle Initial)

**MRS. MARY E. MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2016

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 11 / 2016

Transaction ID : SA11AI.31325

Amount of Each Receipt this Period

2000.00

☒ Memo Item

REATTRIBUTED FROM MCMAHON, CHRIS

Full Name (Last, First, Middle Initial)

**DR. LAURA MCNEILL**

Mailing Address 507 HARTZELL SCHOOL ROAD

City

FOMBELL

State

PA

Zip Code

16123

FEC ID number of contributing federal political committee.

C

Name of Employer

WEST PENN ANESTHESIOLOGY

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 08 / 2016

Transaction ID : SA11AI.31276

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. TIM MCNULTY**

Mailing Address 106 S LINDEN AVE

City

PITTSBURGH

State

PA

Zip Code

15208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARNEGIE MELLON UNIVERSITY

Occupation

AVP - GOVERNMENT AFFAIRS

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 10 / 2016

Transaction ID : SA11AI.31282

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. WILLIAM F MCQUAIDE**

Mailing Address 153 MACRIDGE AVENUE

City

JOHNSTOWN

State

PA

Zip Code

15904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WC MCQUAIDE INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31433

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. MATTHEW MELVIN**

Mailing Address PO BOX 775

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARBERA, CLAPPR, BEENER, LILLOT, & MEL

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31480

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 121

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**A. Full Name (Last, First, Middle Initial)  
**MR. PETER V. MERRITTS**

Mailing Address 128 ODINWOOD COURT

City	State	Zip Code
GREENSBURG	PA	15601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORS COAL CORPOccupation  
COMPANY PRESIDENT - NAPP DIVISION

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : SA11AI.31477

Amount of Each Receipt this Period

250.00

☐ Memo ItemB. Full Name (Last, First, Middle Initial)  
**MR. PATRICK MOLYNEAUX**

Mailing Address 413 LONGLEAF DRIVE

City	State	Zip Code
VENETIA	PA	15367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MOLYNEAUX TILEOccupation  
OWNER

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2016

Transaction ID : SA11AI.31275

Amount of Each Receipt this Period

250.00

☐ Memo ItemC. Full Name (Last, First, Middle Initial)  
**MR. ROBERT F. NEWMAN**

Mailing Address 115 BROOKSIDE BLVD.

City	State	Zip Code
PITTSBURGH	PA	15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2016

Transaction ID : SA11AI.31369

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 121

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. ROBERT OLES**

Mailing Address 120 ELLIE DRIVE

City

BEAVER

State

PA

Zip Code

15009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2016

Transaction ID : SA11AI.31321

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**JAVIER ORTIZ**

Mailing Address 2870 PEACHTREE RD

City

ATLANTA

State

GA

Zip Code

30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FALCON CYBER INVESTMENTS, LLC

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.31563

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. FRANK J. POPOWSKI**

Mailing Address 4401 WILDWOOD SAMPLE ROAD

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

METROPOLITAN PRESCHOOL &amp; NURSERY

Occupation

CHILDCARE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31397

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

800.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. FRANK J. POPOWSKI**

Mailing Address 4401 WILDWOOD SAMPLE ROAD

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

METROPOLITAN PRESCHOOL &amp; NURSERY

Occupation

CHILDCARE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31525

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. JANE POTTER**

Mailing Address 103 TIMBER LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 05 / 2016

Transaction ID : SA11AI.31293

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**KELLY K PRATT**

Mailing Address 900 SOUTH TRENTON AVE

City

PITTSBURGH

State

PA

Zip Code

15221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAUREL PROPERTIES INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 08 / 2016

Transaction ID : SA11AI.31378

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DR. CAROL PRUCHNIC**

Mailing Address 162 LAUREN LANE

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing federal political committee.

C

Name of Employer

C.P.G.

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11AI.31578

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**D. RAJA**

Mailing Address 640 OSAGE ROAD

City

PITTSBURGH

State

PA

Zip Code

15243

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 01 / 2016

Transaction ID : SA11AI.31760

Amount of Each Receipt this Period

1350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMBER G RICHARDS**

Mailing Address 145 FAWN BROOK DR

City

GREER

State

SC

Zip Code

29650

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11AI.31474

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3950.00





# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MRS. DAWN RUCKER**

Mailing Address 116 SNOWBERRY LANE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2016

Transaction ID : SA11AI.31291

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. JEMELE SANDERSON**

Mailing Address 710 STRAIGHT STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11AI.31494

Amount of Each Receipt this Period

625.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. JEMELE SANDERSON**

Mailing Address 710 STRAIGHT STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016

Transaction ID : SA11AI.31495

Amount of Each Receipt this Period

375.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3700.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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PAGE 35 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. CHUCK SCHMIELER**

Mailing Address 1573 HANCOCK AVE

City

APOLLO

State

PA

Zip Code

15613

FEC ID number of contributing federal political committee.

C

Name of Employer

LAUREL AWNING COMPANY

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31546

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**GREG SCHMIELER**

Mailing Address 900 RIVER FRONT DR.

City

FREEPORT

State

PA

Zip Code

16229

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2016

Transaction ID : SA11AI.31322

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MS. BARBARA SHEAR**

Mailing Address 215 N WOODLAND ROAD

City

PITTSBURGH

State

PA

Zip Code

15232

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2016

Transaction ID : SA11AI.31547

Amount of Each Receipt this Period

700.00

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1950.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MS. BARBARA SHEAR**

Mailing Address 215 N WOODLAND ROAD

City

PITTSBURGH

State

PA

Zip Code

15232

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA11AI.31548

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DOUGLAS SHRIBER**

Mailing Address 5440 KIPLING RD

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing federal political committee.

C

Name of Employer

MARBURY GROUP

Occupation

ADVERTISING

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 02 / 2016

Transaction ID : SA11AI.31763

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. MARK SNYDER**

Mailing Address P.O. BOX 1022

City

KIT TANNING

State

PA

Zip Code

16201

FEC ID number of contributing federal political committee.

C

Name of Employer

SNYDER ASSOC. COS.

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11AI.31446

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1300.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 37 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. PETER SOUR**

Mailing Address ROCKLEDGE FARM

P.O. BOX 68

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2016

Transaction ID : SA11AI.31372

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. PETER SOUR**

Mailing Address ROCKLEDGE FARM

P.O. BOX 68

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2016

Transaction ID : SA11AI.31560

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. PETER SOUR**

Mailing Address ROCKLEDGE FARM

P.O. BOX 68

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2016

Transaction ID : SA11AI.31761

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 38 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. PETER H. STEPHAICH**

Mailing Address 525 WILLIAM PENN PLACE  
SUITE 3101

City	State	Zip Code
PITTSBURGH	PA	15219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BLUE DANUBE INCORPORATED

Occupation  
CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.31281

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**STEPTOE & JOHNSON, PLLC**

Mailing Address PO BOX 1588

City	State	Zip Code
CHARLESTON	WV	25326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.31284

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**WILLIAM H. SMITH**

Mailing Address PO BOX 1588

City	State	Zip Code
CHARLESTON	WV	25326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEPTOE & JOHNSON

Occupation  
PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11AI.31285

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP STEPTOE &amp; JOHNSON, PLLC

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ARTHUR M. STANDISH**

Mailing Address PO BOX 1588

City

CHARLESTON

State

WV

Zip Code

25326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEPTOE AND JOHNSON

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		10		2016

Transaction ID : SA11AI.31286

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP STEPTOE &amp; JOHNSON, PLLC

Full Name (Last, First, Middle Initial)

**JAMES W. TURNER**

Mailing Address PO BOX 1588

City

CHARLESTON

State

WV

Zip Code

25326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEPTOE &amp; JOHNSON

Occupation

PARTNER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		10		2016

Transaction ID : SA11AI.31287

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP STEPTOE &amp; JOHNSON, PLLC

Full Name (Last, First, Middle Initial)

**JOHN STEWART**

Mailing Address 69 DARTMOUTH AVENUE

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CONCURRENT TECHNOLOGIES CORP.

Occupation

SENIOR CONTRACTS ADMINSTRATOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		03		2016

Transaction ID : SA11AI.31375

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DR. ERIN A. SULLIVAN**

A.

Mailing Address 650 CANTERBURY LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UPMC

Occupation

ANESTHESIOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2016

Transaction ID : SA11Al.31373

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DR. ERIN A. SULLIVAN**

B.

Mailing Address 650 CANTERBURY LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UPMC

Occupation

ANESTHESIOLOGIST

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2016

Transaction ID : SA11Al.31559

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. NICHOLAS E TEREZIS**

C.

Mailing Address 306 MARBERRY DR.

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARATHON STRATEGIC ADVISORS, LLC

Occupation

INVESTMENT ADVISOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11Al.31445

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 121

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THREE RIVERS MARINE AND RAIL TERMINALS LLC**

Mailing Address VISTA ONE PROFESSIONAL CENTER

17 ARENTZEN BLVD, STE 206

City	State	Zip Code
CHARLEROI	PA	15022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31402

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. SCOTT TURER**

Mailing Address 201 ROBB LANE

City	State	Zip Code
GREENSBURG	PA	15601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

THREE RIVERS MARINE AND RAIL TERMINA

CFO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31815

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JOSEPH D SHEARER**

Mailing Address 1319 WOODBRIDGE DRIVE

City	State	Zip Code
LATROBE	PA	15650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

THREE RIVERS MARINE &amp; RAIL TERMINALS

PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11AI.31816

Amount of Each Receipt this Period

500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. DANIEL VERES****A.**

Mailing Address 10210 GRUBBS ROAD

City

WEXFORD

State

PA

Zip Code

15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GRANT STREET GROUP

Occupation

COO

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2016

**Transaction ID : SA11AI.31573**

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. SCOTT R. WAGNER****B.**

Mailing Address P.O. BOX 1627

City

YORK

State

PA

Zip Code

17405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENN WASTE, INC.

Occupation

OWNER

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA11AI.31581**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MR. SCOTT R. WAGNER****C.**

Mailing Address P.O. BOX 1627

City

YORK

State

PA

Zip Code

17405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENN WASTE, INC.

Occupation

OWNER

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

**Transaction ID : SA11AI.31582**

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

6600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 121

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MS. STACEY H. WEST</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 03 / 2016</div> </div>	
Mailing Address <b>246 PINK HOUSE ROAD</b>		<b>Transaction ID : SA11AI.31374</b>	
City <b>SEWICKLEY</b>	State <b>PA</b>	Zip Code <b>15143</b>	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>500.00</div>	
Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>1500.00</div>		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MS. STACEY H. WEST</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>04 / 05 / 2016</div> </div>	
Mailing Address <b>246 PINK HOUSE ROAD</b>		<b>Transaction ID : SA11AI.31639</b>	
City <b>SEWICKLEY</b>	State <b>PA</b>	Zip Code <b>15143</b>	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>54.00</div>	
Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>1554.00</div>		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>RICHARD WHITE</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 23 / 2016</div> </div>	
Mailing Address <b>101 PRIMROSE ST</b>		<b>Transaction ID : SA11AI.31564</b>	
City <b>CHEVY CHASE</b>	State <b>MD</b>	Zip Code <b>20815</b>	
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>500.00</div>	
Name of Employer <b>THORN RUN PARTNERS</b>	Occupation <b>CONSULTANT</b>	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>500.00</div>		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		<div>1054.00</div>	
<b>TOTAL</b> This Period (last page this line number only).....		<div></div>	

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GEN CAMERON WILSON**

Mailing Address 406 IRONWOOD DR

City	State	Zip Code
CANONSBURG	PA	15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA11AI.31437

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR ROBERT WISE**

Mailing Address 701 TIOGA STREET

City	State	Zip Code
JOHNSTOWN	PA	15905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.31528

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY G. WOLF**

Mailing Address 178 BACKBONE ROAD

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

6300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.31534

Amount of Each Receipt this Period

1800.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2200.00

NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**


Mailing Address 178 BACKBONE ROAD

C

Election Cycle-to-Date

03 / 31 / 2016

3600.00

 Memo Item  
REFUND PENDING

Mailing Address 10 EDGEWOOD ROAD

C

Election Cycle-to-Date

MM / DD / YYYY

500.00

Memo Item

Mailing Address 249 BEAVER STREET

C

Election Cycle-to-Date

MM / DD / YYYY

100.00

Memo Item

4200.00

87847.48

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE**

Mailing Address 101 CONSTITUTION AVE., NW  
 SUITE 700

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00147066

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 29 2016

Transaction ID : SA11C.31501

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)  
**AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE**

Mailing Address 762 WEST LANCASTER AVENUE

City State Zip Code  
 BRYN MAWR PA 19010

FEC ID number of contributing  
federal political committee.

**C** C00340455

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 04 05 2016

Transaction ID : SA11C.31647

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)  
**BAKER, DONELSON, BEARMAN, CALDWELL & BERKOWITZ, PC PAC**

Mailing Address 920 MASSACHUSETTS AVENUE, NW  
 SUITE 900

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00431072

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 29 2016

Transaction ID : SA11C.31498

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CALGON CARBON CORPORATION PAC INC DBA CCC PAC OR CALGON CARBON PAC

A.

Mailing Address 400 CALGON CARBON DRIVE

City

PITTSBURGH

State

PA

Zip Code

15205

FEC ID number of contributing  
federal political committee.

**C** C00543876

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 10 / 2016

Transaction ID : SA11C.31283

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 CAPITAL ONE DRIVE

ATTN: 19050-1204

City

MCLEAN

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

**C** C00326595

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 26 / 2016

Transaction ID : SA11C.31329

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

CME GROUP INC. PAC

Mailing Address 325 SEVENTH STREET NW

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C** C00076299

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11C.31392

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
COMCAST CORPORATION & NBC UNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

A. Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 31 2016

Transaction ID : SA11C.31533

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
B. COZEN O'CONNOR POLITICAL ACTION COMMITTEE

Mailing Address ONE LIBERTY PLACE  
1650 MARKET STREET

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 05 2016

Transaction ID : SA11C.31652

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
C. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 29 2016

Transaction ID : SA11C.31280

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2016

Transaction ID : SA11C.31532

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DELOITTE POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31539

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EAGLE FORUM PAC**

Mailing Address PO BOX 618

City ALTON State IL Zip Code 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11C.31653

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EDUCATION MANAGEMENT CORPORATION EMPLOYEE PAC (EDMC EDU-PAC)**

A.

Mailing Address 210 SIXTH AVENUE

33RD FLOOR

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

**C** C00466169

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2016

Transaction ID : SA11C.31447

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**EQT CORPORATION PAC**

B.

Mailing Address EQT PLAZA

625 LIBERTY AVENUE, SUITE 1700

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

**C** C00151175

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 05 / 2016

Transaction ID : SA11C.31665

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ERNST & YOUNG PAC**

C.

Mailing Address 1101 NEW YORK AVE NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00227744

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31364

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

4750.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FAMILY PAC**

Mailing Address 1001 LIBERTY AVENUE #850

City State Zip Code  
PITTSBURGH PA 15222

FEC ID number of contributing  
federal political committee.

**C** C00336842

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 11 2016

Transaction ID : SA11C.31401

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**

Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 400

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00076810

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 04 2016

Transaction ID : SA11C.31355

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HIGHMARK HEALTH PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER STREET

City State Zip Code  
CAMP HILL PA 17089

FEC ID number of contributing  
federal political committee.

**C** C00302844

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 26 2016

Transaction ID : SA11C.31328

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HIGHMARK HEALTH PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER STREET

City

CAMP HILL

State

PA

Zip Code

17089

FEC ID number of contributing federal political committee.

**C** C00302844

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31351

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1615 L STREET, NW  
SUITE 900

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing federal political committee.

**C** C00032698

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2016

Transaction ID : SA11C.31390

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 20 F STREET NW, STE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31352

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

2000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 53 OF 121

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS &amp; BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address 20 F STREET NW, STE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2016

Transaction ID : SA11C.31353

Amount of Each Receipt this Period

500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00105981

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2016

Transaction ID : SA11C.31290

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00105981

Name of Employer

Occupation

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2016

Transaction ID : SA11C.31387

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00105981

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 11 2016

Transaction ID : SA11C.31388

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)  
 JOHN HANCOCK LIFE INSURANCE COMPANY (USA) FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 601 CONGRESS ST  
 FL 13

City State Zip Code  
 BOSTON MA 02210

FEC ID number of contributing  
federal political committee.

**C** C00137265

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 11 2016

Transaction ID : SA11C.31391

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)  
**KEYSTONE ALLIANCE PAC**

Mailing Address PO BOX 3883

City State Zip Code  
 PHILADELPHIA PA 19146

FEC ID number of contributing  
federal political committee.

**C** C00432096

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 05 2016

Transaction ID : SA11C.31655

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 121

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LIBERTY MUTUAL INSURANCE COMPANY - PAC**

Mailing Address **175 BERKELEY STREET**

City State Zip Code  
**BOSTON MA 02117**

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt

**03 / 25 / 2016**

**Transaction ID : SA11C.31473**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address **2121 CRYSTAL DRIVE  
SUITE 100**

City State Zip Code  
**ARLINGTON VA 22202**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt

**03 / 25 / 2016**

**Transaction ID : SA11C.31467**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **1295 STATE STREET**

City State Zip Code  
**SPRINGFIELD MA 01111**

FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt

**03 / 11 / 2016**

**Transaction ID : SA11C.31393**

Amount of Each Receipt this Period

**2500.00**

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4500.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

**A.** Mailing Address 2901 TELESTAR CT.

City State Zip Code  
 FALLS CHURCH VA 22042

FEC ID number of contributing  
federal political committee.

**C** C00005249

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 25 2016

Transaction ID : SA11C.31470

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
**B.** NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code  
 CHICAGO IL 60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 29 2016

Transaction ID : SA11C.31502

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
**C.** NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 KING STREET  
 SUITE 600

City State Zip Code  
 ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 25 2016

Transaction ID : SA11C.31472

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

6000.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
 NATIONAL FEDERATION OF INDEPENDENT BUSINESS/ SAVE AMERICAS FREE ENTERPRISE TRUST

**A.**

Mailing Address 1201 F ST. NW  
 SUITE 200

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00101105

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2016

**Transaction ID : SA11C.31354**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
**NATIONAL FUEL GAS FEDERAL POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 6363 MAIN STREET

City State Zip Code  
 WILLIAMSVILLE NY 14221

FEC ID number of contributing  
federal political committee.

**C** C00083758

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 19 2016

**Transaction ID : SA11C.31323**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
**NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 1850 M STREET, NW  
 SUITE 540

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2016

**Transaction ID : SA11C.31358**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City State Zip Code  
 FAIRFAX VA 22030

FEC ID number of contributing  
federal political committee.

**C** C00053553

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 29 2016

**Transaction ID : SA11C.31499**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 51 MADISON AVENUE  
 ROOM 1109

City State Zip Code  
 NEW YORK NY 10010

FEC ID number of contributing  
federal political committee.

**C** C00158881

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2016

**Transaction ID : SA11C.31360**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NISOURCE INC. PAC**

Mailing Address 290 W NATIONWIDE BLVD

City State Zip Code  
 COLUMBUS OH 43215

FEC ID number of contributing  
federal political committee.

**C** C00051979

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 25 2016

**Transaction ID : SA11C.31487**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 59 OF 121

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NORTHERN TRUST CORPORATION FEDERAL POLITICAL ACTION COMMITTEE (NORTHERN TRUST FEDERAL PAC)

A.

Mailing Address 50 SOUTH LASALLE STREET M-9

City

CHICAGO

State

IL

Zip Code

60603

FEC ID number of contributing  
federal political committee.

**C** C00515148

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 25 / 2016

Transaction ID : SA11C.31469

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

POLITICAL ACTION COMMITTEE/THE BANK OF NEW YORK MELLON CORPORATION-FEDERAL(BNY MELLON-FED)

Mailing Address BNY MELLON CENTER ROOM 3225

500 GRANT STREET

City

PITTSBURGH

State

PA

Zip Code

15258

FEC ID number of contributing  
federal political committee.

**C** C00494534

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31356

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

POLITICAL ACTION COMMITTEE/THE BANK OF NEW YORK MELLON CORPORATION-FEDERAL(BNY MELLON-FED)

Mailing Address BNY MELLON CENTER ROOM 3225

500 GRANT STREET

City

PITTSBURGH

State

PA

Zip Code

15258

FEC ID number of contributing  
federal political committee.

**C** C00494534

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

Transaction ID : SA11C.31357

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PRIMERICA INC POLITICAL ACTION COMMITTEE (PRIMERICA PAC)**

Mailing Address 1 PRIMERICA PARKWAY

City State Zip Code  
 DULUTH GA 30099

FEC ID number of contributing  
federal political committee.

**C** C00521914

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 29 2016

Transaction ID : SA11C.31497

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address ONE STATE FARM PLAZA

City State Zip Code  
 BLOOMINGTON IL 61710

FEC ID number of contributing  
federal political committee.

**C** C00544817

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 04 2016

Transaction ID : SA11C.31365

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**STATE STREET BANK AND TRUST COMPANY VOLUNTARY POLITICAL ACTION COMMITTEE**

Mailing Address BOX 5351

City State Zip Code  
 BOSTON MA 02206

FEC ID number of contributing  
federal political committee.

**C** C00072751

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 11 2016

Transaction ID : SA11C.31389

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

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for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>TEA PARTY FORWARD</b>		<b>Date of Receipt</b> M M / D D / Y Y Y Y Y Y 04 / 04 / 2016	
<b>Mailing Address</b> 211 N UNION STREET SUITE 100		<b>Transaction ID : SA11C.31589</b>	
<b>City</b> ALEXANDRIA	<b>State</b> VA	<b>Zip Code</b> 22314	<b>Amount of Each Receipt this Period</b> 500.00
<b>FEC ID number of contributing federal political committee.</b> C C00608166		<input type="checkbox"/> Memo Item	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> 500.00	
<b>B. Full Name (Last, First, Middle Initial)</b> TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF		<b>Date of Receipt</b> M M / D D / Y Y Y Y Y Y 02 / 10 / 2016	
<b>Mailing Address</b> 601 THIRTEENTH STREET, NW SUITE 700 NORTH		<b>Transaction ID : SA11C.31289</b>	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code</b> 20005	<b>Amount of Each Receipt this Period</b> 1000.00
<b>FEC ID number of contributing federal political committee.</b> C C00431361		<input type="checkbox"/> Memo Item	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2016</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> 1000.00	
<b>C. Full Name (Last, First, Middle Initial)</b> <b>TEAM CAMBRIA</b>		<b>Date of Receipt</b> M M / D D / Y Y Y Y Y Y 01 / 08 / 2016	
<b>Mailing Address</b> 715 BREEZEWOOD DR		<b>Transaction ID : SA11C.31277</b>	
<b>City</b> JOHNSTOWN	<b>State</b> PA	<b>Zip Code</b> 15905	<b>Amount of Each Receipt this Period</b> 1000.00
<b>FEC ID number of contributing federal political committee.</b> C		<input type="checkbox"/> Memo Item	
<b>Name of Employer</b> 		<b>Occupation</b> 	
<b>Receipt For: 2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>Election Cycle-to-Date</b> 1000.00	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....		2500.00	
<b>TOTAL This Period (last page this line number only)</b> .....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**THE NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL PAC**

Mailing Address 101 CONSTITUTION AVE. NW  
 SUITE 800

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00197095

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2016

Transaction ID : SA11C.31361

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)  
**THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1627 I STREET NW SUITE 900

City State Zip Code  
 WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00040394

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 29 2016

Transaction ID : SA11C.31500

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)  
**THRIVENT FINANCIAL FOR LUTHERANS - EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address POST OFFICE BOX 1892

City State Zip Code  
 APPLETON WI 54912

FEC ID number of contributing  
federal political committee.

**C** C00121319

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 25 2016

Transaction ID : SA11C.31471

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

60750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>INSURING OUR FUTURE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 04 / 2016	
Mailing Address 824 S MILLEDGE AVE, STE 101		<b>Transaction ID : SA12.31705</b>	
City ATHENS	State GA	Zip Code 30605	Amount of Each Receipt this Period 1310.44
FEC ID number of contributing federal political committee. C C00583583		<input type="checkbox"/> Memo Item TRANSFER OF NET JFC FUNDS	
Name of Employer  	Occupation  		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 17016.83		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JONATHAN E MICHAEL</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 20 / 2016	
Mailing Address 9025 N LINDBERGH DR		<b>Transaction ID : SA12.31706</b>	
City PEORIA	State IL	Zip Code 61615	Amount of Each Receipt this Period 1333.33
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item	
Name of Employer RLI	Occupation CHAIRMAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1333.33		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>ROTHFUS VICTORY COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2016	
Mailing Address PO BOX 2485		<b>Transaction ID : SA12.31656</b>	
City SPRINGFIRLED	State VA	Zip Code 22152	Amount of Each Receipt this Period 32972.35
FEC ID number of contributing federal political committee. C C00608885		<input type="checkbox"/> Memo Item TRANSFER OF NET JFC FUNDS	
Name of Employer  	Occupation  		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 32972.35		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		34282.79	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PPG BETTER GOVERNMENT TEAM; PPG INDUSTRIES INC.**

Mailing Address ONE PPG PLACE

40TH FLOOR

City

PITTSBURGH

State

PA

Zip Code

15272

FEC ID number of contributing  
federal political committee.

**C** C00034298

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31820

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MS. ANNE B. METCALF**

Mailing Address 938 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

NONE

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31821

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JOHN J ZBIHLEY**

Mailing Address 2513 MINTON DR

City

MOON TOWNSHIP

State

PA

Zip Code

15108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

ON DEMAND ENERGY

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31822

Amount of Each Receipt this Period

100.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DR. MARC RICE, M.D.**

Mailing Address 208 FAIRVIEW ROAD

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31823

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JOSEPH RESCHINI**

Mailing Address 922 PHILADELPHIA STREET

City

INDIANA

State

PA

Zip Code

15701

FEC ID number of contributing federal political committee.

C

Name of Employer

RESCHINI AGENCY, INC

Occupation

INSURANCE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31824

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. THOMAS B. GREALISH**

Mailing Address 920 FORT DUQUESNE BLVD.

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing federal political committee.

C

Name of Employer

HENDERSON BROTHERS, INC.

Occupation

PRESIDENT

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31825

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. PATRICK GALLAGHER**

Mailing Address 19 OAK KNOLL

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

PGT TRUCKING

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31827

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JAMES C. RODDEY**

Mailing Address 1413 OAK STREET

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

BAKER TILLY, LLC

Occupation

FIRM DIRECTOR

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2016

Transaction ID : SA12.31828

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. JAMES (CLIFF) C. FORREST III**

Mailing Address 3 COLBERT LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer

ROSEBUD MINING CO.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA12.31829

Amount of Each Receipt this Period

1700.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. JAMES (CLIFF) C. FORREST III**

Mailing Address 3 COLBERT LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

**C**

Name of Employer

ROSEBUD MINING CO.

Occupation

PRESIDENT

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

Transaction ID : SA12.31830

Amount of Each Receipt this Period

800.00

☒ Memo Item

A.

Full Name (Last, First, Middle Initial)

**RBS CITIZENS FINANCIAL GROUP, INC. POLITICAL COMMITTEE (RBS CITIZENS PAC)**

Mailing Address C/O KENNETH W. ROBINSON, TREASURER

ONE CITIZENS PLAZA, 5TH FLOOR

City

PROVIDENCE

State

RI

Zip Code

02903

FEC ID number of contributing federal political committee.

**C** C00307249

Name of Employer

Occupation

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

Transaction ID : SA12.31831

Amount of Each Receipt this Period

1000.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

**DR. RICHARD BONFIGLIO**

Mailing Address PO BOX 185

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing federal political committee.

**C**

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2016

Transaction ID : SA12.31832

Amount of Each Receipt this Period

1700.00

☒ Memo Item

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DR. RICHARD BONFIGLIO**

Mailing Address PO BOX 185

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2016

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31833

Amount of Each Receipt this Period

800.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ALBERT F. SCHMIDT**

Mailing Address 511 WIMER CIRCLE

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHMIDT CONSULTING

Occupation

OWNER

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31834

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. RALPH T. DESTEFANO**

Mailing Address 214 TYLER COURT

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31835

Amount of Each Receipt this Period

500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 121

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**MR. FRANK CALANDRA, JR.**

Mailing Address PO BOX 111253

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JENNMAR CORPORATIONOccupation  
PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31836

Amount of Each Receipt this Period

500.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)**MR. AUSTIN HENRY**

Mailing Address 104 SHADOW RIDGE DRIVE

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLS & HENRYOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31837

Amount of Each Receipt this Period

500.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)**MR. JOHN STILLEY**

Mailing Address 131 BLACKTHORN DRIVE

City	State	Zip Code
BUTLER	PA	16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERIKOHL MINING INC.Occupation  
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31838

Amount of Each Receipt this Period

2500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. G. NICHOLAS BECKWITH, III III**

Mailing Address 1 LITTLE LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer

ARCH STREET MANAGEMENT, LLC

Occupation

CHAIRMAN &amp; CEO-BUSINESS EXEC.

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA12.31839

Amount of Each Receipt this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. G. NICHOLAS BECKWITH, III III**

Mailing Address 1 LITTLE LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer

ARCH STREET MANAGEMENT, LLC

Occupation

CHAIRMAN &amp; CEO-BUSINESS EXEC.

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA12.31840

Amount of Each Receipt this Period

800.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ROBERT MILLER**

Mailing Address 2271 COUNTRY CLUB DRIVE

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2016

Transaction ID : SA12.31841

Amount of Each Receipt this Period

500.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. BRADLEY S. TUPI**

Mailing Address 1470 REDFERN DRIVE

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TUCKER ARENSBERG PC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

48.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31842

Amount of Each Receipt this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. EARL BOHN**

Mailing Address 7315 PERRYVILLE AVENUE

City

PITTSBURGH

State

PA

Zip Code

15202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA12.31843

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**DR. RICHARD BONFIGLIO**

Mailing Address PO BOX 185

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2016

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2016

Transaction ID : SA12.31844

Amount of Each Receipt this Period

500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. LOUIS WEISS**

Mailing Address 2975 BEECHWOOD BLVD.

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31845

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MRS. EILEEN E HOLSTE**

Mailing Address 626 GRANDVIEW AVE.

City

PITTSBURGH

State

PA

Zip Code

15211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31846

Amount of Each Receipt this Period

125.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. DENNIS WILKE**

Mailing Address 726 WOODBRIDGE DRIVE

City

OAKDALE

State

PA

Zip Code

15071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROSEDALE TECH

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1394.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31847

Amount of Each Receipt this Period

250.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. FRANK V. CAHOUE**

Mailing Address BNY MELLON CENTER #4101

City

PITTSBURGH

State

PA

Zip Code

15258

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : SA12.31848

Amount of Each Receipt this Period

500.00

☒ Memo Item

A.

Full Name (Last, First, Middle Initial)

**MR. CLIFFORD BENSON**

Mailing Address 133 CENTENNIAL AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

BUFFALO SABRES

Occupation

CHIEF DEVELOPMENT OFFICER

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : SA12.31849

Amount of Each Receipt this Period

500.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

**MS. BEVERLY WEISS MANNE**

Mailing Address 2137 BEECHWOOD BOULEVARD

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing federal political committee.

C

Name of Employer

TUCKER ARENSBERG, PC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

Transaction ID : SA12.31850

Amount of Each Receipt this Period

100.00

☒ Memo Item

C.

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MS. BEVERLY WEISS MANNE**

Mailing Address 2137 BEECHWOOD BOULEVARD

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing federal political committee.

C

Name of Employer

TUCKER ARENSBERG, PC

Occupation

ATTORNEY

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31851

Amount of Each Receipt this Period

400.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MS. LAURA ELLSWORTH**

Mailing Address 414 LAUREL OAK DRIVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

JONES DAY

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31852

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. PETER H. STEPHAICH**

Mailing Address 525 WILLIAM PENN PLACE  
SUITE 3101

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing federal political committee.

C

Name of Employer

BLUE DANUBE INCORPORATED

Occupation

CEO

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31853

Amount of Each Receipt this Period

500.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. ROY A. POWELL**

Mailing Address 117 CARRIAGE HILL ROAD

City

SEVEN FIELDS

State

PA

Zip Code

16046

FEC ID number of contributing federal political committee.

C

Name of Employer

JONES DAY

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31854

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. RICHARD BRANDT**

Mailing Address 630 GROVE STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

RICHARD K. BRANDT LAW OFFICE LLC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31855

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. RONALD H. MUHLENKAMP**

Mailing Address 725 THREE DEGREE ROAD

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing federal political committee.

C

Name of Employer

MUHLENKAMP &amp; CO. INC.

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2016

Transaction ID : SA12.31856

Amount of Each Receipt this Period

1000.00

☒ Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES P. BALET**

Mailing Address 525 PINE RD

City State Zip Code  
SEWICKLEY PA 15143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PITTSBURGH UNIVERSAL MANAGER

Receipt For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	17	2016

Transaction ID : SA12.31857

Amount of Each Receipt this Period

700.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CATHERINE VASILKO**

Mailing Address 140 LUNA LANE

City State Zip Code  
JOHNSTOWN PA 15904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BETHANY PRESCHOOL TEACHER

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	17	2016

Transaction ID : SA12.31858

Amount of Each Receipt this Period

2500.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DOLLAR SAVINGS BANK POLITICAL ACTION COMMITTEE (DOLPAC)**

Mailing Address THREE GATEWAY CENTER  
PUBLIC AFFAIRS 1 EAST

City State Zip Code  
PITTSBURGH PA 15222

FEC ID number of contributing federal political committee. **C** C00151563

Name of Employer Occupation

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date  
4200.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	17	2016

Transaction ID : SA12.31859

Amount of Each Receipt this Period

1000.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CONSOL ENERGY INC. PAC**Mailing Address **CNX CENTER****1000 CONSOL ENERGY DRIVE**

City

**CANONSBURG**

State

**PA**

Zip Code

**15317**FEC ID number of contributing  
federal political committee.**C** **C00279331**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**5000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

**Transaction ID : SA12.31860**

Amount of Each Receipt this Period

**2500.00**☒ Memo Item

Full Name (Last, First, Middle Initial)

**MR. ROBERT G. WILMERS**Mailing Address **ONE M&T BANK**

City

**BUFFALO**

State

**NY**

Zip Code

**14203**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**M&T BANK****CHAIRMAN & CEO**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**2000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2016

**Transaction ID : SA12.31861**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

Full Name (Last, First, Middle Initial)

**FREDERICK G CLERICI**Mailing Address **311 CAMBRIDGE DR**

City

**MARS**

State

**PA**

Zip Code

**16046**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**INFORMATION REQUESTED****INFORMATION REQUESTED**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**150.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

**Transaction ID : SA12.31862**

Amount of Each Receipt this Period

**150.00**☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**0.00****TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
---	-------------------------------------	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**A. Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. CRANMER SR.**

Mailing Address 3406 BROWNSVILLE RD.

City	State	Zip Code
PITTSBURGH	PA	15227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CRANMER CONSULTANTSOccupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA12.31863

Amount of Each Receipt this Period

250.00

☒ Memo ItemB. Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. RIORDAN**Mailing Address SPRING HILL  
877 BLACKBURN ROAD

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA12.31864

Amount of Each Receipt this Period

500.00

☒ Memo ItemC. Full Name (Last, First, Middle Initial)  
**S&T BANK/S&T BANCORP, INC. POLITICAL ACTION COMMITTEE**Mailing Address P.O. BOX 190  
800 PHILADELPHIA ST

City	State	Zip Code
INDIANA	PA	15701

FEC ID number of contributing  
federal political committee.

C C00263483

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2016

Transaction ID : SA12.31865

Amount of Each Receipt this Period

500.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN J. MYERS**

Mailing Address 600 GRANT ST., STE 4400

City	State	Zip Code
PITTSBURGH	PA	15219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ECKERT SEAMANSOccupation  
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

Transaction ID : SA12.31866

Amount of Each Receipt this Period

500.00

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MRS. NADINE E. BOGNAR**

Mailing Address 742 PINOAK ROAD

City	State	Zip Code
PITTSBURGH	PA	15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2016

Transaction ID : SA12.31867

Amount of Each Receipt this Period

500.00

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. C. TALBOTT HITESHEW JR. JR.**

Mailing Address 1 OVERLOOK DRIVE

City	State	Zip Code
PITTSBURGH	PA	15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNTER ASSOCIATES INC.Occupation  
STOCKBROKER

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2016

Transaction ID : SA12.31868

Amount of Each Receipt this Period

200.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

34282.79

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. 3000 MCKNIGHT EAST ASSOCIATES**

Mailing Address 3000 MCKNIGHT EAST DR, #302

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
OFFICE RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

1300.00

☐ Memo Item

Transaction ID : SB17.31658

**B. 3000 MCKNIGHT EAST ASSOCIATES**

Mailing Address 3000 MCKNIGHT EAST DR, #302

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
INTERNET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2016

Amount of Each Disbursement this Period

75.00

☐ Memo Item

Transaction ID : SB17.31659

**C. 3000 MCKNIGHT EAST ASSOCIATES**

Mailing Address 3000 MCKNIGHT EAST DR, #302

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
OFFICE RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2016

Amount of Each Disbursement this Period

1662.13

☐ Memo Item

Transaction ID : SB17.31679

**SUBTOTAL** of Disbursements This Page (optional).....

3037.13

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. 3000 MCKNIGHT EAST ASSOCIATES**

Mailing Address 3000 MCKNIGHT EAST DR, #302

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2016

City	State	Zip Code
PITTSBURGH	PA	15237

Amount of Each Disbursement this Period

1571.69
---------

Purpose of Disbursement  
OFFICE RENT

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17.31606

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. ALLEGHENY COUNTRY CLUB**

Mailing Address 33 WATSON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

City	State	Zip Code
SEWICKLEY	PA	15143

Amount of Each Disbursement this Period

300.67
--------

Purpose of Disbursement  
MEETING EXPENSE

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17.31604

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. BEAVER COUNTY CHAMBER OF COMMERCE**

Mailing Address 798 TURNPIKE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

City	State	Zip Code
BEAVER	PA	15009

Amount of Each Disbursement this Period

400.00
--------

Purpose of Disbursement  
ADVERTISING

001

☐ Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17.31662

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2272.36

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BEAVER COUNTY REPUBLICAN COMMITTEE**

Mailing Address 426 ADMAS ST. #2

City	State	Zip Code
ROCHESTER	PA	15074

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2016

Amount of Each Disbursement this Period

360.00

☐ Memo Item

Transaction ID : SB17.31678

**B. BEAVER COUNTY SPORTS HALL OF FAME**

Mailing Address 533 PHILLIPS ST

City	State	Zip Code
BADEN	PA	15005

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

60.00

☐ Memo Item

Transaction ID : SB17.31650

**C. BEAVER COUNTY SPORTS HALL OF FAME**

Mailing Address 533 PHILLIPS ST

City	State	Zip Code
BADEN	PA	15005

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.31651

**SUBTOTAL** of Disbursements This Page (optional).....

520.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMBRIA COUNTY REPUBLICAN COMMITTEE**

Mailing Address 450 LURAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2016

City	State	Zip Code
JOHNSTOWN	PA	15904

Amount of Each Disbursement this Period

Purpose of Disbursement  
SPONSORSHIP

001

1000.00
---------

Candidate Name

☐ Memo Item

Transaction ID : SB17.31682

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

City	State	Zip Code
ALEXANDRIA	VA	22314

Amount of Each Disbursement this Period

Purpose of Disbursement  
CC TRANSACTION FEES

001

690.00
--------

Candidate Name

☐ Memo Item

Transaction ID : SB17.31615

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

City	State	Zip Code
ALEXANDRIA	VA	22314

Amount of Each Disbursement this Period

Purpose of Disbursement  
CC TRANSACTION FEES

001

1.20
------

Candidate Name

☐ Memo Item

Transaction ID : SB17.31695

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1691.20
---------

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2016

Amount of Each Disbursement this Period

89.05
-------

☐ Memo Item

Transaction ID : SB17.31696

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

159.36
--------

☐ Memo Item

Transaction ID : SB17.31688

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

9.57
------

☐ Memo Item

Transaction ID : SB17.31689

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

257.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N ST ASAPH ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

Amount of Each Disbursement this Period

1251.43

☐ Memo Item

Transaction ID : SB17.31800

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2016

Amount of Each Disbursement this Period

255.60

☐ Memo Item

Transaction ID : SB17.31681

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

325.10

☐ Memo Item

Transaction ID : SB17.31596

**SUBTOTAL** of Disbursements This Page (optional).....

1832.13

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CATHOLIC CHARITIES**

Mailing Address 212 9TH ST

City	State	Zip Code
PITTSBURGH	PA	15222

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : SB17.31697

**B. DUQUESNE CLUB**

Mailing Address PO BOX 387

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2016

Amount of Each Disbursement this Period

871.38

☐ Memo Item

Transaction ID : SB17.31597

**C. DUQUESNE CLUB**

Mailing Address PO BOX 387

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

4693.22

☐ Memo Item

Transaction ID : SB17.31603

**SUBTOTAL** of Disbursements This Page (optional).....

6564.60

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2016

Amount of Each Disbursement this Period

4602.91

☐ Memo Item

Transaction ID : SB17.31796

**B. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2016

Amount of Each Disbursement this Period

2305.82

☐ Memo Item

Transaction ID : SB17.31624

**C. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2016

Amount of Each Disbursement this Period

2301.46

☐ Memo Item

Transaction ID : SB17.31680

**SUBTOTAL** of Disbursements This Page (optional).....

9210.19

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GREATER JOHNSTOWN CAMBRIA COUNTY CHAMBER OF COMMERCE**

Mailing Address 245 MARKET STREET

City	State	Zip Code
JOHNSTOWN	PA	15901

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

210.00

☐ Memo Item

Transaction ID : SB17.31648

**B. HEARTH**

Mailing Address 3724 MOUNT ROYAL BLVD #101

City	State	Zip Code
GLENSHAW	PA	15116

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.31670

**C. JOHNSTOWN SPORTSMEN**

Mailing Address 829 HORNER ST

City	State	Zip Code
JOHNSTOWN	PA	15902

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

120.00

☐ Memo Item

Transaction ID : SB17.31602

**SUBTOTAL** of Disbursements This Page (optional).....

830.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JAMES N KERIN**

Mailing Address 258 TAYLOR AVE, FLOOR 3

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
02 / 24 / 2016

Amount of Each Disbursement this Period

376.84

☐ Memo Item

Transaction ID : SB17.31674

Full Name (Last, First, Middle Initial)

**B. LAUREL HIGHLANDS COUNCIL**

Mailing Address 201 W HIGH ST., STE. 1

City	State	Zip Code
EBENSBURG	PA	15931

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2016

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Transaction ID : SB17.31613

Full Name (Last, First, Middle Initial)

**C. LONG NYQUIST & ASSOCIATES CONSULTING**

Mailing Address 121 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
02 / 08 / 2016

Amount of Each Disbursement this Period

19617.44

☐ Memo Item

Transaction ID : SB17.31660

SUBTOTAL of Disbursements This Page (optional).....

20144.28

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LONG NYQUIST & ASSOCIATES CONSULTING**

Mailing Address 121 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

6969.28
---------

☐ Memo Item

Transaction ID : SB17.31594

**B. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

1657.60
---------

☐ Memo Item

Transaction ID : SB17.31616

**C. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

3193.27
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☐ Memo Item

Transaction ID : SB17.31617

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

11820.15

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

4109.86

☐ Memo Item

Transaction ID : SB17.31618

**B. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2016

Amount of Each Disbursement this Period

14531.66

☐ Memo Item

Transaction ID : SB17.31622

**C. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

5176.45

☐ Memo Item

Transaction ID : SB17.31664

**SUBTOTAL** of Disbursements This Page (optional).....

23817.97

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2016

Amount of Each Disbursement this Period

6291.56
---------

☐ Memo Item

Transaction ID : SB17.31595

**B. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

2118.47
---------

☐ Memo Item

Transaction ID : SB17.31600

**C. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City  
BEAVERState  
PAZip Code  
15009Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2016

Amount of Each Disbursement this Period

4492.11
---------

☐ Memo Item

Transaction ID : SB17.31601

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12902.14

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MCCANDLESS REPUBLICAN COMMITTEE**

Mailing Address PO BOX 155

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2016

City	State	Zip Code
INGOMAR	PA	15127

Amount of Each Disbursement this Period

Purpose of Disbursement  
SPONSORSHIP

001

250.00

Candidate Name

☐ Memo Item

Transaction ID : SB17.31605

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**B. MCCANDLESS REPUBLICAN COMMITTEE**

Mailing Address PO BOX 155

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2016

City	State	Zip Code
INGOMAR	PA	15127

Amount of Each Disbursement this Period

Purpose of Disbursement  
EVENT TICKETS

001

70.00

Candidate Name

☐ Memo Item

Transaction ID : SB17.31704

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Full Name (Last, First, Middle Initial)

**C. MY FAX SERVICE**

Mailing Address 6922 HOLLYWOOD BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

City	State	Zip Code
HOLLYWOOD	CA	90028

Amount of Each Disbursement this Period

Purpose of Disbursement  
TELEPHONE

001

20.00

Candidate Name

☐ Memo Item

Transaction ID : SB17.31692

Office Sought:	House	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

340.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NRA FOUNDATION**

Mailing Address 380 HILLSIDE LN

City  
SOMERSETState  
PAZip Code  
15501Purpose of Disbursement  
EVENT TICKET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

40.00
-------

☐ Memo Item

Transaction ID : SB17.31668

**B. PNC BANK**

Mailing Address PO BOX 609

City  
PITTSBURGHState  
PAZip Code  
15230Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

30.50
-------

☐ Memo Item

Transaction ID : SB17.31690

**C. PNC BANK**

Mailing Address PO BOX 609

City  
PITTSBURGHState  
PAZip Code  
15230Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

22.49
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☐ Memo Item

Transaction ID : SB17.31693

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

92.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		04		2016

Amount of Each Disbursement this Period

16.00
-------

☐ Memo Item

Transaction ID : SB17.31694

**B. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2016

Amount of Each Disbursement this Period

30.50
-------

☐ Memo Item

Transaction ID : SB17.31684

**C. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

22.49
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☐ Memo Item

Transaction ID : SB17.31686

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

68.99

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	02	/	2016

Amount of Each Disbursement this Period

16.00
-------

☐ Memo Item

Transaction ID : SB17.31687

**B. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	01	/	2016

Amount of Each Disbursement this Period

35.50
-------

☐ Memo Item

Transaction ID : SB17.31698

**C. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	02	/	2016

Amount of Each Disbursement this Period

22.49
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☐ Memo Item

Transaction ID : SB17.31701

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

73.99
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2016

Amount of Each Disbursement this Period

16.00
-------

☐ Memo Item

Transaction ID : SB17.31702

**B. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

35.50
-------

☐ Memo Item

Transaction ID : SB17.31797

**C. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2016

Amount of Each Disbursement this Period

16.00
-------

☐ Memo Item

Transaction ID : SB17.31798

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

67.50
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 04 / 2016

Amount of Each Disbursement this Period

22.49
-------

☐ Memo Item

Transaction ID : SB17.31799

**B. PNC BANKCARD**

Mailing Address PO BOX 856177

City	State	Zip Code
LOUISVILLE	KY	40285

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2016

Amount of Each Disbursement this Period

2383.56
---------

☐ Memo Item

Transaction ID : SB17.31691

**C. US POSTMASTER**

Mailing Address 521 THORN STREET

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 05 / 2016

Amount of Each Disbursement this Period

49.00
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☒ Memo Item

Transaction ID : SB17.31707

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2406.05

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City	State	Zip Code
WALTHAM	MA	02451

Purpose of Disbursement  
EMAIL SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

42.80
-------

☒ Memo Item

Transaction ID : SB17.31709

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

357.02
--------

☒ Memo Item

Transaction ID : SB17.31710

**C. THE KIMBERLY HOTEL**

Mailing Address 145 E 50TH ST

City	State	Zip Code
NEW YORK	NY	10022

Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

244.24
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☒ Memo Item

Transaction ID : SB17.31711

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ALGONQUIN HOTEL**

Mailing Address 59 W 44TH ST

City	State	Zip Code
NEW YORK	NY	10036

Purpose of Disbursement  
LODGING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

354.64

☒ Memo Item

Transaction ID : SB17.31712

**B. NYC TAXI**

Mailing Address 876 MCDONALD AVE

City	State	Zip Code
BROOKLYN	NY	11218

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

209.98

☒ Memo Item

Transaction ID : SB17.31714

**C. AMTRAK**

Mailing Address PO BOX 14368

City	State	Zip Code
PHILADELPHIA	PA	19115

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

486.00

☒ Memo Item

Transaction ID : SB17.31716

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 4002

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

50.08
-------

☒ Memo Item

Transaction ID : SB17.31719

**B. WEB NETWORK SOLUTIONS**

Mailing Address 12808 GRAN BAY PARKWAY

City	State	Zip Code
JACKSONVILLE	FL	32258

Purpose of Disbursement  
WEB SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

49.16
-------

☒ Memo Item

Transaction ID : SB17.31720

**C. GIANT EAGLE**

Mailing Address 5550 CENTRE AVENUE

City	State	Zip Code
PITTSBURGH	PA	15219

Purpose of Disbursement  
FUEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2016

Amount of Each Disbursement this Period

22.23
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☒ Memo Item

Transaction ID : SB17.31721

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANKCARD**

Mailing Address PO BOX 856177

City	State	Zip Code
LOUISVILLE	KY	40285

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

3622.93

☐ Memo Item

Transaction ID : SB17.31685

**B. US POSTMASTER**

Mailing Address 521 THORN STREET

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

294.00

☒ Memo Item

Transaction ID : SB17.31724

**C. AMERICAN AIRLINES**

Mailing Address 2500 VICTORY AVE

City	State	Zip Code
DALLAS	TX	75219

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

909.20

☒ Memo Item

Transaction ID : SB17.31725

**SUBTOTAL** of Disbursements This Page (optional).....

3622.93

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

360.69

☒ Memo Item

Transaction ID : SB17.31726

**B. JETBLUE AIRWAYS**

Mailing Address 27-01 QUEENS PLAZA N

City	State	Zip Code
LONG ISLAND CITY	NY	11101

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

281.10

☒ Memo Item

Transaction ID : SB17.31727

**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City	State	Zip Code
WALTHAM	MA	02451

Purpose of Disbursement  
EMAIL SERVICES

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

42.80

☒ Memo Item

Transaction ID : SB17.31728

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 4002

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

92.88
-------

☒ Memo Item

Transaction ID : SB17.31729

**B. ALLEGHENY COUNTY MEDICAL SOCIETY**

Mailing Address 713 RIDGE AVE

City	State	Zip Code
PITTSBURGH	PA	15212

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

390.00
--------

☒ Memo Item

Transaction ID : SB17.31730

**C. SAMS CLUB**

Mailing Address 249 SUMMIT PARK DRIVE

City	State	Zip Code
PITTSBURGH	PA	15275

Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2016

Amount of Each Disbursement this Period

447.07
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☒ Memo Item

Transaction ID : SB17.31731

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GIANT EAGLE**

Mailing Address 5550 CENTRE AVENUE

City	State	Zip Code
PITTSBURGH	PA	15219

Purpose of Disbursement  
FUEL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	02	/	2016

Amount of Each Disbursement this Period

30.53
-------

☒ Memo Item

Transaction ID : SB17.31732

**B. HOUSE GIFT SHOP**

Mailing Address LONGWORTH HOUSE OFFICE BUILDING

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement  
GIFTS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	02	/	2016

Amount of Each Disbursement this Period

60.90
-------

☒ Memo Item

Transaction ID : SB17.31734

**C. WEB NETWORK SOLUTIONS**

Mailing Address 12808 GRAN BAY PARKWAY

City	State	Zip Code
JACKSONVILLE	FL	32258

Purpose of Disbursement  
WEB SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02	/	02	/	2016

Amount of Each Disbursement this Period

24.58
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☒ Memo Item

Transaction ID : SB17.31736

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANKCARD**

Mailing Address PO BOX 856177

City	State	Zip Code
LOUISVILLE	KY	40285

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

1172.84

☐ Memo Item

Transaction ID : SB17.31699

**B. CHICK FIL A**

Mailing Address 5200 BUFFINGTON RD

City	State	Zip Code
ATLANTA	GA	30349

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

690.25

☒ Memo Item

Transaction ID : SB17.31740

**C. ENTERPRISE CAR RENTAL**

Mailing Address 600 CORPORATE PARK DR

City	State	Zip Code
ST LOUIS	MO	63105

Purpose of Disbursement  
CAR RENTAL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

285.04

☒ Memo Item

Transaction ID : SB17.31743

**SUBTOTAL** of Disbursements This Page (optional).....

1172.84

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 121

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City	State	Zip Code
WALTHAM	MA	02451

Purpose of Disbursement  
EMAIL SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

42.80
-------

☒ Memo Item

Transaction ID : SB17.31744

**B. WEB NETWORK SOLUTIONS**

Mailing Address 12808 GRAN BAY PARKWAY

City	State	Zip Code
JACKSONVILLE	FL	32258

Purpose of Disbursement  
WEB SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

24.58
-------

☒ Memo Item

Transaction ID : SB17.31745

**C. OPERATION STRONG VET**

Mailing Address PO BOX 1025

City	State	Zip Code
WEXFORD	PA	15090

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2016

Amount of Each Disbursement this Period

25.00
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☒ Memo Item

Transaction ID : SB17.31746

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address PO BOX 4002

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	03	/	2016

Amount of Each Disbursement this Period

50.08
-------

☒ Memo Item

Transaction ID : SB17.31747

**B. PNC BANKCARD**

Mailing Address PO BOX 856177

City	State	Zip Code
LOUISVILLE	KY	40285

Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04	/	01	/	2016

Amount of Each Disbursement this Period

1252.74
---------

☐ Memo Item

Transaction ID : SB17.31748

**C. AMERICAN AIRLINES**

Mailing Address 2500 VICTORY AVE

City	State	Zip Code
DALLAS	TX	75219

Purpose of Disbursement  
AIRFARE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04	/	01	/	2016

Amount of Each Disbursement this Period

739.30
--------

☒ Memo Item

Transaction ID : SB17.31749

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1252.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address PO BOX 14368

City	State	Zip Code
PHILADELPHIA	PA	19115

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

147.00

☒ Memo Item

Transaction ID : SB17.31750

**B. US POSTMASTER**

Mailing Address 521 THORN STREET

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

42.55

☒ Memo Item

Transaction ID : SB17.31751

**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City	State	Zip Code
WALTHAM	MA	02451

Purpose of Disbursement  
EMAIL SERVICES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

42.80

☒ Memo Item

Transaction ID : SB17.31752

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ALL CITY TAXI**

Mailing Address 2301 CHURCH ST, STE 2

City	State	Zip Code
PHILADELPHIA	PA	19124

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2016

Amount of Each Disbursement this Period

49.96
-------

☒ Memo Item

Transaction ID : SB17.31756

**B. PREMIER CAPITAL ADVISORS**

Mailing Address 3000 MCKNIGHT EAST DR

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
OFFICE RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2016

Amount of Each Disbursement this Period

2264.52
---------

☐ Memo Item

Transaction ID : SB17.31620

**C. PYRAMID CLUB**

Mailing Address 1735 MARKET ST, 52ND FLOOR

City	State	Zip Code
PHILADELPHIA	PA	19103

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2016

Amount of Each Disbursement this Period

895.23
--------

☐ Memo Item

Transaction ID : SB17.31700

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3159.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. REPUBLIC STRATEGIES, LLC**

Mailing Address 3502 HALCYON DR

City	State	Zip Code
ALEXANDRIA	VA	22305

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		11		2016

Amount of Each Disbursement this Period

1330.83

☐ Memo Item

Transaction ID : SB17.31619

**B. REPUBLIC STRATEGIES, LLC**

Mailing Address 3502 HALCYON DR

City	State	Zip Code
ALEXANDRIA	VA	22305

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2016

Amount of Each Disbursement this Period

9765.00

☐ Memo Item

Transaction ID : SB17.31626

**C. REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY**

Mailing Address 100 FLEET STREET, #205

City	State	Zip Code
PITTSBURGH	PA	15220

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:	Primary	General
	Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2016

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Transaction ID : SB17.31627

**SUBTOTAL** of Disbursements This Page (optional).....

11895.83

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY**

Mailing Address 100 FLEET STREET, #205

City	State	Zip Code
PITTSBURGH	PA	15220

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2016

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Transaction ID : SB17.31628

**B. REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY**

Mailing Address 100 FLEET STREET, #205

City	State	Zip Code
PITTSBURGH	PA	15220

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

325.00

☐ Memo Item

Transaction ID : SB17.31657

**C. KEITH ROTHFUS**

Mailing Address PO BOX 435

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
REISSUE OF PREVIOUS-7/21/2014

001

Candidate Name

**KEITH ROTHFUS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: PA District: 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

1364.33

☐ Memo Item

Transaction ID : SB17.31635

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1789.33

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ST. BARNABAS CHARITIES**

Mailing Address 5850 MERIDIAN RD

City	State	Zip Code
GIBSONIA	PA	15044

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.31599

**B. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2016

Amount of Each Disbursement this Period

8.04

☐ Memo Item

Transaction ID : SB17.31312

**C. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

8.04

☐ Memo Item

Transaction ID : SB17.31540

**SUBTOTAL** of Disbursements This Page (optional).....

516.08

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE CONGRESSIONAL INSTITUTE**

Mailing Address 1700 DIAGONAL ROAD

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
RETREAT TRAVEL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		29		2016

Amount of Each Disbursement this Period

853.00

☐ Memo Item

Transaction ID : SB17.31683

**B. THE PENNSYLVANIA FAMILY INSTITUTE**

Mailing Address 23 N FRONT ST

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2016

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Transaction ID : SB17.31609

**C. TRAVIS MARION FOUNDATION**

Mailing Address 164 E STATE ST

City	State	Zip Code
DOYLESTOWN	PA	18901

Purpose of Disbursement  
PRINTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

Amount of Each Disbursement this Period

1125.00

☐ Memo Item

Transaction ID : SB17.31672

**SUBTOTAL** of Disbursements This Page (optional).....

2478.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER**

Mailing Address 521 THORN STREET

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
BOX RENTAL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2016

Amount of Each Disbursement this Period

100.00
--------

☐ Memo Item

Transaction ID : SB17.31611

**B. VETERANS BREAKFAST CLUB**

Mailing Address 200 MAGNOLIA PLACE

City	State	Zip Code
PITTSBURGH	PA	15228

Purpose of Disbursement  
ADVERTISING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2016

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Transaction ID : SB17.31623

**C. VINCENTIAN CHARITABLE FOUNDATION**

Mailing Address 8250 BABCOCK BLVD

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

Amount of Each Disbursement this Period

260.00
--------

☐ Memo Item

Transaction ID : SB17.31667

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

860.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WESTMORELAND COUNTY REPUBLICAN COMMITTEE**

Mailing Address 23 N. MAPLE AVE

City	State	Zip Code
GREENSBURG	PA	15601

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name  
**WESTMORELAND COUNTY REPUBLICAN COMMITTEE**Category/  
Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 08 / 2016

Amount of Each Disbursement this Period

600.00
--------

☐ Memo Item

Transaction ID : SB17.31598

**B. KEITH ROTHFUS**

Mailing Address PO BOX 435

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
2014 POST GEN MEETING EXPENSE,POSTAGE,AIRFARE

001

Candidate Name  
**KEITH ROTHFUS**Category/  
Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: PA District: 12

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2016

Amount of Each Disbursement this Period

1159.59
---------

☐ Memo Item

Transaction ID : SB17.31632

**C. KEITH ROTHFUS**

Mailing Address PO BOX 435

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
2014 POST GEN MEETING EXPENSE,SHIPPING

001

Candidate Name  
**KEITH ROTHFUS**Category/  
Type

Office Sought:	Disbursement For:
<input checked="" type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> President	

State: PA District: 12

Date of Disbursement

M M / D D / Y Y Y Y
01 / 28 / 2016

Amount of Each Disbursement this Period

378.57
--------

☐ Memo Item

Transaction ID : SB17.31633

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2138.16

126835.31

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CUSTOM CLOTHING SOLUTIONS INC.**

Mailing Address 330W 42ND ST, STE 900

City	State	Zip Code
NEW YORK	NY	10036

Purpose of Disbursement  
REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2016

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Transaction ID : SB20A.31625

**B. MRS. LINDA L. SEDWICK**

Mailing Address 443 BELMONT ROAD

City	State	Zip Code
BUTLER	PA	16001

Purpose of Disbursement  
REFUND

010

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2016

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Transaction ID : SB20A.31629

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

☐  
 Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....

3700.00

**TOTAL** This Period (last page this line number only).....

3700.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 121

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BLUM FOR CONGRESS**

Mailing Address 2728 ASBURY ROAD SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2016

City	State	Zip Code
DUBUQUE	IA	52001

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011

☐ Memo Item

Candidate Name

**RODNEY BLUM**Category/  
Type

Transaction ID : SB21.31671

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: IA District: 01

Full Name (Last, First, Middle Initial)

**B. DON BACON FOR CONGRESS**

Mailing Address P.O. BOX 391368

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

City	State	Zip Code
OMAHA	NE	68139

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011

☐ Memo Item

Candidate Name

**DON BACON FOR CONGRESS**Category/  
Type

Transaction ID : SB21.31703

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. RELIGHT AMERICA PAC**

Mailing Address PO BOX 2485

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2016

City	State	Zip Code
SPRINGFIELD	VA	22152

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

011

☐ Memo Item

Candidate Name

**RELIGHT AMERICA PAC**Category/  
Type

Transaction ID : SB21.31673

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

3000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 120 OF 121

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

2014 POST GEN SHIPPING, MEETING  
EXPENSE, PARKING

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

378.57

Transaction ID : SD10.31

Amount Incurred This Period

0.00

Payment This Period

378.57

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

POST GEN MEETING EXPENSES,  
POSTAGE, SHIPPING, AIRFARE

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

1159.59

Transaction ID : SD10.32

Amount Incurred This Period

0.00

Payment This Period

1159.59

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

Q4 2015 MEETING EXPENSES

Mailing Address PO BOX 435

City

State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

593.42

Transaction ID : SD10.33

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

593.42

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

593.42

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 121 OF 121

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

Q1 2016 EXPENSES

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.34

Amount Incurred This Period

751.41

Payment This Period

0.00

Outstanding Balance at Close of This Period

751.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

751.41

2) **TOTALS** This Period (last page this line number only) .....

1344.83

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

1344.83